

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Patent Application

I hereby certify that this transmittal of the below described documents is being deposited with the United States Postal Service in an envelope bearing Express Mail Postage and an Express Mail label, with the below serial number, addressed to the Commissioner of Patents and Trademarks, Washington, D.C., 20231, on the below date of deposit.			
Express Mail Label No.:	EL860203095US	Name of Person Making the Deposit:	Anthony Chou
Date of Deposit:	10/02/01	Signature of the Person Making the Deposit:	<i>Anthony Chou</i>

Inventor(s): Sean S. Chen

Title: LOW VOLTAGE, LOW Z, BAND-GAP REFERENCE

The Commissioner of Patents and Trademarks

Washington, D.C. 20231

Sir:

Transmittal of a Patent Application

(Under 37 CFR §1.53)

Transmitted herewith is the above identified patent application, including:

- ☒ Specification, claims and abstract, totaling 20 pages.
- ☐ Formal drawings, totaling _____ pages.
- ☒ Informal drawings, totaling 3 pages.
- ☒ Declaration and Power of Attorney.
- ☐ Information Disclosure statement.
- ☐ Form 1449
- ☒ Assignment(s)
- ☒ Assignment Recordation Form (duplicate)
- ☐ Preliminary Amendment
- ☒ Request and Certification under 35 U.S.C. 122(b)(2)(B)(i)
- ☐ Other: _____

FEES DUE

The fees due for filing the specification pursuant to 37 C.F.R. § 1.16 and for recording of the Assignment, if any, are determined as follows:

CLAIMS					
	NO. OF CLAIMS		EXTRA CLAIMS	RATE	FEES
Basic Application Fee					\$740.00
Total Claims	23	Minus 20=	3	X \$18 =	\$54.00
Independent Claims	3	Minus 3=	0	X \$84=	\$0.00
If multiple dependent claims are presented, add \$260.00					\$0.00
Add Assignment Recording Fee of \$40.00 If Assignment document is enclosed					\$40.00
TOTAL APPLICATION FEE DUE					\$834.00

PAYMENT OF FEES

The full fee due in connection with this communication is provided as follows:

1. Not enclosed
 - ☐ No filing fee is to be paid at this time.
2. Enclosed
 - ☒ Filing fee
 - ☒ Recording assignment
 - ☐ Petition fee for filing by other than all the inventors or person on behalf of the inventor where inventor refused to sign or cannot be reached
 - ☐ For processing an application with specification in a non-English language
 - ☐ Processing and retention fee
 - ☐ Fee for international-type search report
 - ☒ The Commissioner is hereby authorized to charge any additional fees associated with this communication or credit any overpayment to Deposit Account No.: 23-0085. A duplicate copy of this authorization is enclosed.
 - ☒ A check in the amount of \$834.00
 - ☐ Charge any fees required or credit any overpayments associated with this filing to Deposit Account No.: 23-0085.

This application is filed pursuant to 37 C.F.R. § 1.53 in the name of the above-identified Inventor(s).

Please direct all correspondence concerning the above-identified application to the following address:

WAGNER, MURABITO & HAO LLP
Two North Market Street, Third Floor
San Jose, California 95113
(408) 938-9060

- ☒ This transmittal ends with this page.

Respectfully submitted,

Date: 10/2/01

By: 

James P. Hao
Reg. No. 36,398

#2

C. B.

12-06-01

Date: 10/2/01

If applicant subsequently files an application directed to the invention disclosed in the attached application in another country, or under a multilateral international agreement, that requires publication of applications eighteen months after filing, the applicant must notify the United States Patent and Trademark Office of such filing within forty-five (45) days after the date of the filing of such foreign or international application. **Failure to do so will result in abandonment of this application (35 U.S.C. 122(b)(2)(B)(iii)).**

Please type a plus sign (+) inside this box → [+]

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

UTILITY PATENT APPLICATION TRANSMITTAL <i>(Only for new nonprovisional applications under 37 CFR 1.53(b))</i>		Attorney Docket No. 2433-0016	
		First Inventor Yu-Ping CHU et al	
Title ANISOTROPIC FORMATION PROCESS OF OXIDE LAYERS FOR VERTICAL TRANSISTORS			
Express Mail Label No.			

APPLICATION ELEMENTS <i>See MPEP chapter 600 concerning utility patent application contents.</i>		ADDRESS TO: Commissioner for Patents Box Patent Application Washington, DC 20231	
--	--	---	--

1. <input checked="" type="checkbox"/> Fee Transmittal Form (e.g., PTO/SB/17) <i>(Submit an original and a duplicate for fee processing)</i> 2. <input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27. 3. <input checked="" type="checkbox"/> Specification [Total Pages 10] <i>(preferred arrangement set forth below)</i> - Descriptive title of the invention - Cross Reference to Related Applications - Statement Regarding Fed sponsored R & D - Reference to sequence listing, a table, or a computer program listing appendix - Background of the Invention - Brief Summary of the Invention - Brief Description of the Drawings <i>(if filed)</i> - Detailed Description - Claim(s) - Abstract of the Disclosure 4. <input checked="" type="checkbox"/> Drawing(s) (35 U.S.C. 113) Figs. 1a-4 Total Sheets 5] 5. Oath or Declaration [Total Sheets 3] a. <input checked="" type="checkbox"/> Newly executed (original or copy) b. <input type="checkbox"/> Copy from a prior application (37 CFR 1.63(d)) <i>(for continuation/divisional with Box 18 completed)</i> i. <input type="checkbox"/> DELETION OF INVENTOR(S) Signed statement attached deleting inventor(s) named in the prior application, see 37 CFR 1.63(d)(2) and 1.33(b) 6. <input checked="" type="checkbox"/> Application Data Sheet. See 37 CFR 1.76	7. <input type="checkbox"/> CD-ROM or CD-R in duplicate, large table or Computer Program (Appendix) 8. Nucleotide and/or Amino Acid Sequence Submission <i>(if applicable, all necessary)</i> a. <input type="checkbox"/> Computer Readable Form (CRF) b. Specification Sequence Listing on: i. <input type="checkbox"/> CD-ROM or CD-R (2 copies; or ii. <input type="checkbox"/> paper c. <input type="checkbox"/> Statements verifying identity of above copies ACCOMPANYING APPLICATION PARTS 9. <input checked="" type="checkbox"/> Assignment Papers (cover sheet & document(s)) 10. <input type="checkbox"/> 37 CFR 3.73(b) Statement <input type="checkbox"/> Power of <i>(when there is an assignee)</i> Attorney 11. <input type="checkbox"/> English Translation Document <i>(if applicable)</i> 12. <input checked="" type="checkbox"/> Information Disclosure <input checked="" type="checkbox"/> Copies of IDS Statement (IDS)/PTO-1449 Citations 13. <input type="checkbox"/> Preliminary Amendment 14. <input checked="" type="checkbox"/> Return Receipt Postcard (MPEP 503) <i>(Should be specifically itemized)</i> 15. <input type="checkbox"/> Certified Copy of Priority Document(s) <i>(if foreign priority is claimed)</i> 16. <input type="checkbox"/> Request and Certification under 35 U.S.C. 122 (b)(2)(B)(I). Applicant must attach form PTO/SB/35 or its equivalent. 17. <input type="checkbox"/> Other: _____
--	--

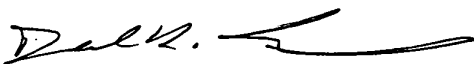
18. If a CONTINUING APPLICATION, check appropriate box, and supply the requisite information below and in a preliminary amendment, or in an Application Data Sheet under 37 CFR 1.76:

☐ Continuation ☐ Divisional ☐ Continuation-in-part (CIP) of prior application No.: _____ / _____

Prior application information: Examiner: _____ Group / Art Unit: _____

For CONTINUATION OR DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 5b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts.

19. CORRESPONDENCE ADDRESS					
<input checked="" type="checkbox"/> Customer Number or Bar Code Label		22204 <i>(Insert Customer No. or Attach bar code label here)</i>		or <input checked="" type="checkbox"/> Correspondence address below	
Name Donald R. Studebaker					
Address NIXON PEABODY LLP					
8180 Greensboro Drive, Suite 800					
City McLean		State VA		Zip Code 22102	
Country United States		Telephone (703) 790-9110		Fax (703) 883-0370	

Name (Print/Type) Donald R. Studebaker		Registration No. (Attorney/Agent) #32,815	
Signature 		Date 10/7/01	

 JC997 U.S. PTO
 09/971735


Burden Hour Statement: this form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, Box Patent Application, Washington, DC 20231.

FEE TRANSMITTAL FOR FY 2001

Patent fees are subject to annual revision.

TOTAL AMOUNT OF PAYMENT (\$) 750.00

METHOD OF PAYMENT

1. ☒ The Commissioner is hereby authorized to charge indicated fees and credit any overpayments to:

Deposit Account Number 19-2380 (2433-0015)

Deposit Account Name NIXON PEABODY LLP
8180 Greensboro Drive Suite 800
McLean, Va. 22102

- ☒ Charge Any Additional Fee Required Under 37 CFR 1.16 and 1.17

☐ Applicant claims small entity status. See 37 CFR 1.27

2. ☒ Payment Enclosed:

☒ Check ☐ Credit Card ☐ Money Order ☐ Other

FEE CALCULATION

1. BASIC FILING FEE

Large Entity Fee Code	Large Entity Fee (\$)	Small Entity Fee Code	Small Entity Fee (\$)	Fee Description	Fee Paid
101	710	201	355	Utility filing fee	\$710.00
106	320	206	160	Design filing fee	
107	490	207	245	Plant filing fee	
108	710	208	355	Reissue filing fee	
114	150	214	75	Provisional filing fee	

SUBTOTAL (1) (\$) 710.00

2. EXTRA CLAIM FEES

Total Claims	Extra Claims	Fee from below	Fee Paid
22	-20** = 2	X 18.00	= 36.00
Independent Claims	2	-3** = 0	X =
Multiple Dependent			=

Large Entity Fee Code	Large Entity Fee (\$)	Small Entity Fee Code	Small Entity Fee (\$)	Fee Description
103	18	203	9	Claims in excess of 20
102	80	202	40	Independent claims in excess of 3
104	270	204	135	Multiple dependent claim, if not paid
109	80	209	40	** Reissue independent claims over original patent
110	18	210	9	** Reissue claims in excess of 20 and over original patent

SUBTOTAL (2) (\$) 36.00

**or number previously paid, if greater; For Reissues, see above

SUBMITTED BY

Name (Print/Type) Donald R. Studebaker

Registration No. 32,815
(Attorney/Agent)

Complete (if applicable)

Telephone (703) 790-9110

Signature

Donald R. Studebaker

Date

10/9/01

WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.